


# **EXHIBIT A**

|   |                                |   |
|---|--------------------------------|---|
| <b>ORDER OF PRETRIAL<br/>CONDITIONS OF RELEASE</b>  | DOCKET No(s)<br><b>3057371</b> | <b>MASSACHUSETTS TRIAL COURT</b>  |
| DEFENDANT'S NAME & ADDRESS<br><br><b>Timmy Hunt</b> | PCF No.<br><br><b>19-85</b>    | COURT DEPARTMENT<br><b>Superior Court</b><br>COURT<br><b>Suffolk Superior Court</b>                                 |

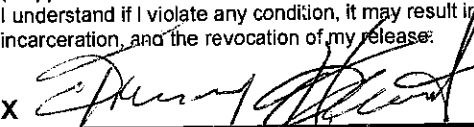
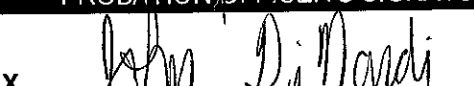

**FAILURE TO OBEY THIS ORDER MAY RESULT IN YOUR ARREST AND INCARCERATION**

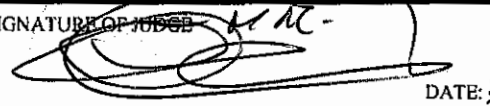
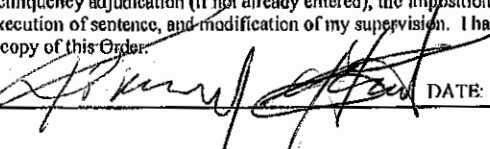
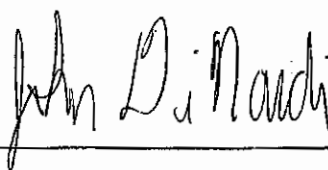
**TO THE DEFENDANT:** It is hereby **ORDERED** that you must comply with all **PRETRIAL CONDITIONS OF RELEASE** that are checked or filled in below pursuant to:

- ☐ **G.L. c. 276, § 57** (Superior Court bail and pretrial conditions of release)
 ☐ **G.L. c. 276, § 58** (specified restrictions on personal association or conduct; or in cases alleging domestic violence, to ensure the safety of the alleged victim, any other individual or the community)
 ☐ **G.L. c. 276, § 42A** (in cases alleging domestic violence, reasonable restrictions on the travel, association, or place of abode of the defendant, as will prevent contact with the person allegedly abused)
 ☐ **G.L. c. 276, § 87** (pretrial conditions of release with the consent of the defendant; distinguished from pretrial probation as a conditional disposition)

**THE FOLLOWING CONDITIONS ARE ORDERED:**

- A**
- ☒ OBEY all local, state, and federal laws and court orders, including abuse and harassment prevention orders and support orders.
  - ☒ NOTIFY the probation department immediately if you change your residence or mailing address or if you change your contact information.
  - ☒ MAKE NO FALSE STATEMENTS to a probation officer.
  - ☒ SIGN RELEASES to verify your compliance with the terms of this order and provide verification as directed by probation.
  - ☒ DO NOT LEAVE MASSACHUSETTS unless you get the express permission of your probation officer and sign a waiver of rendition.
  - ☐ SURRENDER ALL PASSPORTS AND PASSPORT ID CARDS to the court and do not seek a replacement.
  - ☐ REFRAIN FROM POSSESSION of any firearms, rifles, shotguns, destructive devices, or dangerous weapons.
  - ☐ REFRAIN FROM ABUSE and/or HARASSMENT of \_\_\_\_\_
  - ☐ HAVE NO CONTACT, direct or indirect, with \_\_\_\_\_
  - ☐ STAY (distance) \_\_\_\_\_ AWAY FROM \_\_\_\_\_
  - ☐ STAY AWAY FROM (address) \_\_\_\_\_
  - ☐ RESIDE ☐ in/at: \_\_\_\_\_ ☐ with: \_\_\_\_\_
  - ☐ TAKE MEDICATION as prescribed by licensed medical provider.
  - ☐ DO NOT OPERATE a motor vehicle. ☐ SURRENDER your driver's license to probation and do not seek a replacement.
  - ☐ REMAIN ☐ DRUG FREE ☐ INCLUDING MEDICAL MARIJUANA ☐ ALCOHOL FREE
- B**
- ☐ SUBMIT TO RANDOM TESTING or ☐ TESTING \_\_\_\_\_ times per \_\_\_\_\_
  - ☐ REPORT TO THE PROBATION DEPARTMENT as directed by probation and/or as ordered below:
    - ☐ by phone ☐ in person ☐ \_\_\_\_\_ times per week
  - ☐ ATTEND and verify to your probation officer \_\_\_\_\_ meetings per week of ☐ Recovery/AA/NA ☐ \_\_\_\_\_
  - ☐ COOPERATE in a ☐ Mental Health ☐ Substance Use Disorder evaluation and any recommended treatment.
  - ☐ Use REMOTE ALCOHOL TESTING DEVICE.
  - ☒ Comply with ELECTRONIC MONITORING ☐ EXCLUSION ZONE(S): \_\_\_\_\_
  - ☒ HOME CONFINEMENT ☐ CURFEW: \_\_\_\_\_ ☐ OTHER: \_\_\_\_\_
  - ☐ PARTICIPATE in \_\_\_\_\_ program and verify completion to probation by (date) \_\_\_\_\_
  - ☐ OTHER CONDITIONS: \_\_\_\_\_

|   |                     |  |                      |
|---|---------------------|--|----------------------|
| <b>DEFENDANT'S ACKNOWLEDGEMENT OF ORDER</b>   |                     | <b>INTERPRETER'S SIGNATURE, if any</b>   |                      |
| SIGNATURE OF DEFENDANT: I have read and understood these conditions.<br>(If applicable: I consent to conditions imposed under G.L. c. 276, § 87.)<br>I understand if I violate any condition, it may result in my arrest and incarceration, and the revocation of my release. |                     | I have translated the terms of this Order, and the acknowledgement set forth to the left, to the defendant prior to his/her signature. |                      |
| <b>X</b>    | DATE: _____         | <b>X</b> _____   | DATE: _____          |
| <b>PROBATION OFFICER'S SIGNATURE AS WITNESS</b>   |                     | <b>JUDGE'S SIGNATURE</b>   |                      |
| <b>X</b>    | DATE: <b>7-1-21</b> | <b>X</b>   | DATE: <b>3/14/19</b> |

|  |   |  |   |   |   |  |
|--|---|--|---|---|---|--|
| <b>ORDER OF GPS SUPERVISION CONDITIONS</b>   |   |  | DOCKET NO(s). IN WHICH GPS WAS ORDERED:<br><b>1984CR00085</b>   |   | PROBATIONER'S NAME & ADDRESS:<br><b>TIMMY EUGENE HUNT</b>   |  |
|  |   |  | PCF:<br><b>3057371</b>  |   |   |  |
| <input type="checkbox"/> BOSTON MUNICIPAL COURT  | <input type="checkbox"/> DISTRICT COURT | <input checked="" type="checkbox"/> SUPERIOR COURT | <input type="checkbox"/> JUVENILE COURT   | <input type="checkbox"/> PROBATE & FAMILY COURT | Suffolk<br>DIVISION/COUNTY  |  |
| <input type="checkbox"/> PRE-TRIAL PROBATION   |   | <input type="checkbox"/> CONDITIONS OF RELEASE     |   | <input type="checkbox"/> PROBATION CONDITIONS   |   |  |
| TO THE ABOVE NAMED PROBATIONER: You are hereby placed on GPS by this Court. Unless you are excused by your probation officer, you must appear in court on the GPS supervision end date indicated, at which time a report on your GPS progress will be made. If you fail to appear on that date or any other date required, a warrant may be issued for your arrest. Coordinates and other data related to your physical location while on GPS are recorded and may be shared with the court, probation, parole, attorneys and law enforcement. Data generated by GPS equipment assigned to you is not private and confidential. It is your responsibility to maintain contact with probation at all times while under GPS supervision unless expressly authorized. |   |  |   |   | GPS SUPERVISION START DATE:<br>If equipment is not available on date of Order, date equipment became available and supervision started: _____ |  |
|  |   |  |   |   | GPS SUPERVISION END DATE: _____   |  |
| <b>GENERAL CONDITIONS OF GPS SUPERVISION (You must comply with Items 1-8 unless struck out by judge)</b>   |   |  |   |   |   |  |
| 1. Do not tamper or interfere with or otherwise damage or destroy the GPS device(s) or strap(s).<br>2. Notify your probation officer within 24 hours if you change phone numbers (applies to landline and cell).<br>3. Keep available cell phone minutes so that Probation can contact you.<br>4. Keep available voicemail space on your phone or answering system.<br>5. Keep the GPS device(s) charged at all times.<br>6. Exclusion zone(s): _____<br>_____<br>7. Inclusion zone(s): _____<br>_____<br>8. Curfew: <u>House Arrest</u>   |   |  |   |   |   |  |
| <b>SPECIAL CONDITIONS OF GPS SUPERVISION (You must also comply with all items listed below)</b>  |   |  |   |   |   |  |
| prior to release   |   |  |   |   |   |  |
| JUDGE'S SIGNATURE  |   |  | INTERPRETER'S SIGNATURE   |   |   |  |
| SIGNATURE OF JUDGE: <br>x _____ DATE: <u>4/4/19</u>   |   |  | SIGNATURE OF INTERPRETER, if any: I have translated the items of this Order set forth above and the acknowledgement set forth below to the probationer prior to his/her signature.<br>x _____ DATE: _____ |   |   |  |
| PROBATIONER'S ACKNOWLEDGEMENT OF ORDER   |   |  | PROBATION OFFICER'S SIGNATURE   |   |   |  |
| SIGNATURE OF PROBATIONER: I have read and understand the above conditions of GPS supervision and I agree to observe them. I understand that if I violate any such condition it may result in my being brought before the court, my arrest, revocation of probation, the entry of a guilty finding or delinquency adjudication (if not already entered), the imposition or execution of sentence, and modification of my supervision. I have received a copy of this Order.<br>x  DATE: _____  |   |  | SIGNATURE OF WITNESSING PROBATION OFFICER<br>x  DATE: <u>7-1-19</u>   |   |   |  |